



County of San Bernardino

FAS

CONTRACT TRANSMITTAL

FOR COUNTY USE ONLY

<input checked="" type="checkbox"/> New <input type="checkbox"/> Change <input type="checkbox"/> Cancel	Vendor Code	SC	Dept.	A	Contract Number
County Department		Dept.		Orgn.	Contractor's License No.
Arrowhead Regional Medical Center					
County Department Contract Representative		Telephone		Total Contract Amount	
Mark H. Uffer, Director		(909) 580-6150		\$4,000	
Contract Type <input type="checkbox"/> Revenue <input type="checkbox"/> Encumbered <input type="checkbox"/> Unencumbered <input type="checkbox"/> Other:					
If not encumbered or revenue contract type, provide reason:					
Commodity Code		Contract Start Date	Contract End Date	Original Amount	Amendment Amount
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.
EAD	MCR	MCR	200	2445	
					Amount
					\$4,000
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.
					Amount
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No.
					Amount
Project Name			Estimated Payment Total by Fiscal Year		
Membership with			FY	Amount	I/D
CPQCC					
Contract Type - 1					

CONTRACTOR CALIFORNIA PERINATAL QUALITY CARE COLLABORATIVE

Federal ID No. or Social Security No. _____

Contractor's Representative Barbara Murphy, Project Director

Address 750 Welch Road, Suite 224, Palo Alto, CA 94304

Phone (650) 723-5763

Nature of Contract: *(Briefly describe the general terms of the contract)*

This agreement allows the Medical Center to participate in the California Perinatal Quality Care Collaborative, which uses data collected from California hospitals, for the development and implementation of performance improvement strategies in maternity and neonatal care units in California.

THIS IS NOT A CONTRACT
THIS IS A COVER
TRANSMITTAL ONLY

(Attach this transmittal to all contracts not prepared on the "Standard Contract" form.)

Approved as to Legal Form (sign in blue ink)

Charles J. Hartman
County Counsel

Date 4-11-03

Reviewed as to Contract Compliance

TRANSMITTAL ONLY

Date _____

Presented to BOS for Signature

Manly
Department Head

Date 5/6/03

Auditor/Controller-Recorder Use Only

